



***Substitute House Bill No. 5477***

***Public Act No. 06-110***

***AN ACT CONCERNING THE SUPERVISION OF PHYSICIAN ASSISTANTS.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. Subdivision (7) of section 20-12a of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2006*):

(7) (A) "Supervision" in hospital settings means the exercise by the supervising physician of oversight, control and direction of the services of a physician assistant. Supervision includes but is not limited to: [(A)] (i) Continuous availability of direct communication either in person or by radio, telephone or telecommunications between the physician assistant and the supervising physician; [(B)] (ii) active and continuing overview of the physician assistant's activities to ensure that the supervising physician's directions are being implemented and to support the physician assistant in the performance of his or her services; [(C)] (iii) personal review by the supervising physician of the physician assistant's practice at least weekly or more frequently as necessary to ensure quality patient care; [(D)] (iv) review of the charts and records of the physician assistant on a regular basis as necessary to ensure quality patient care; [(E)] (v) delineation of a predetermined plan for emergency situations; and [(F)]

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(vi) designation of an alternate licensed physician registered with the department pursuant to section 20-12c, as amended by this act, in the absence of the supervising physician.

(B) "Supervision" in settings other than hospital settings means the exercise by the supervising physician of oversight, control and direction of the services of a physician assistant. Supervision includes, but is not limited to: (i) Continuous availability of direct communication either in person or by radio, telephone or telecommunications between the physician assistant and the supervising physician; (ii) active and continuing overview of the physician assistant's activities to ensure that the supervising physician's directions are being implemented and to support the physician assistant in the performance of his or her services; (iii) personal review by the supervising physician of the physician assistant's services through a face-to-face meeting with the physician assistant, at least weekly or more frequently as necessary to ensure quality patient care, at a facility or practice location where the physician assistant or supervising physician performs services; (iv) review of the charts and records of the physician assistant on a regular basis as necessary to ensure quality patient care and written documentation by the supervising physician of such review at the facility or practice location where the physician assistant or supervising physician performs services; (v) delineation of a predetermined plan for emergency situations; and (vi) designation of an alternate licensed physician registered with the department pursuant to section 20-12c, as amended by this act, in the absence of the supervising physician.

Sec. 2. Subsection (b) of section 20-12c of the 2006 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2006*):

(b) A physician may function as a supervising physician for as many

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physician assistants as is medically appropriate under the circumstances, provided (1) the supervision is active and direct, [and at the specific location in which the physician assistant is practicing,] and (2) the physician is supervising not more than six full-time physician assistants concurrently, or the part-time equivalent thereof.

Approved June 2, 2006